

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Abel Maldonado For Congress

ADDRESS (number and street)  
▼

PO Box 5325

Check if different  
than previously  
reported. (ACC)

Santa Maria

CA

93456-5325

2. FEC IDENTIFICATION NUMBER ▼

C

C00493379

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

CA

24

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kelly Lawler

Signature of Treasurer

Kelly Lawler

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 31

Write or Type Committee Name

**Abel Maldonado For Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	2

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	7500	14225
(b) Total Contribution Refunds (from Line 20(d)) .....	1000	1000
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	6500	13225
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	71333.22	112891.93
(b) Total Offsets to Operating Expenditures (from Line 14).....	336.78	336.78
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	70996.44	112555.15
8. Cash on Hand at Close of Reporting Period (from Line 27).....	33389.75	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	26760.97	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 31

Write or Type Committee Name

Abel Maldonado For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	2

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

7500

12750

(ii) Unitemized.....

0

475

(iii) TOTAL of contributions from individuals ▶

7500

13225

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

1000

(d) The Candidate.....

0

0

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

7500

14225

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0

0

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0

0

(b) All Other Loans.....

0

0

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0

0

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

336.78

336.78

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

1826.16

1826.16

**16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

9662.94

16387.94

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 31

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	71333.22	112891.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	1000	1000
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs) .....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000	1000
21. OTHER DISBURSEMENTS .....	0	0
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	72333.22	113891.93

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	96060.03
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9662.94
25. SUBTOTAL (add Line 23 and Line 24).....	105722.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	72333.22
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	33389.75

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 31

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
Abel Maldonado For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Jean Crossland</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2012	
Mailing Address 2102 Forge Road		<b>Transaction ID : A-MC5998</b>	
City Santa Barbara	State CA	Zip Code 93108-2238	Amount of Each Receipt this Period _____ 500
FEC ID number of contributing federal political committee. C _____		Reattributed from Spouse <b>[MEMO ITEM]</b>	
Name of Employer n/a	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	Election Cycle-to-Date _____ 1500		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Larry Fernandez</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2012	
Mailing Address 380 Crestmont Drive		<b>Transaction ID : A-C40084</b>	
City San Luis Obispo	State CA	Zip Code 93401-7948	Amount of Each Receipt this Period _____ 2500
FEC ID number of contributing federal political committee. C _____		Debt Retirement	
Name of Employer US Agriseeds	Occupation Owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	Election Cycle-to-Date _____ 2500		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Stephen K. Crossland</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2012	
Mailing Address 2102 Forge Road		<b>Transaction ID : A-MC5997</b>	
City Montecito	State CA	Zip Code 93108-2238	Amount of Each Receipt this Period _____ -500
FEC ID number of contributing federal political committee. C _____		Reattributed to Spouse <b>[MEMO ITEM]</b>	
Name of Employer n/a	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	Election Cycle-to-Date _____ 2500		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		_____ 2500.00	
<b>TOTAL</b> This Period (last page this line number only).....		_____	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

A. Marcia Ibsen

Mailing Address 1571 E Main Street

City

Santa Maria

State

CA

Zip Code

93454-3410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2012

Transaction ID : A-C40088

Amount of Each Receipt this Period

1250

Full Name (Last, First, Middle Initial)

B. Dean C. Storkan

Mailing Address PO Box 1557

City

Pebble Beach

State

CA

Zip Code

93953-1557

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TriCal, Inc.Occupation  
President/Chief Executive Officer

Receipt For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2012

Transaction ID : A-MC5995

Amount of Each Receipt this Period

-1000

Presumptive Reattribution to Spouse

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Robert Ibsen

Mailing Address 1571 E Main Street

City

Santa Maria

State

CA

Zip Code

93454-3410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dr. Robert L. Ibsen, DDSOccupation  
Dentist

Receipt For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

Election Cycle-to-Date

2250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2012

Transaction ID : A-C40089

Amount of Each Receipt this Period

1250

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

Kathy Tompkins

Mailing Address 193 Oak Grove Road

City

Arroyo Grande

State

CA

Zip Code

93420-5680

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Arroyo Grande Community Hosp

Occupation

Board Member

Receipt For: 2012

☐ Primary☐ General☒ Other (specify)

General 2012

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2012

Transaction ID : A-C40085

Amount of Each Receipt this Period

2500

Debt Retirement

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

7500.00

FOR LINE NUMBER:		PAGE 8 OF 31	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14
			<input type="checkbox"/> 15

NAME OF COMMITTEE (In Full)  
Abel Maldonado For Congress

Date of Receipt

MM / DD / YYYY

12 / 31 / 2012

Transaction ID : A-O40106

City	State	Zip Code
San Francisco	CA	94118-1836

C

Name of Employer


Occupation

Receipt For: 2014

☒ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date



336.78

Amount of Each Receipt this Period

336.78

Reverse Duplicate Fees

Date of Receipt

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Election Cycle-to-Date

Amount of Each Receipt this Period

Date of Receipt

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: ☐ Primary ☐ General  
☐ Other (specify) \_\_\_\_\_

Election Cycle-to-Date

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional) .....

	336.78
	336.78

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 31

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Abel Maldonado For Congress**

Full Name (Last, First, Middle Initial)

**San Luis Obispo Clerk-Recorder****A.**Mailing Address 1055 Monterey Street  
Room D120

City	State	Zip Code
San Luis Obispo	CA	93408-1003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

Election Cycle-to-Date

3005.1

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2012

**Transaction ID : A-M40080**

Amount of Each Receipt this Period

1826.16

Refund of Ballot Smt Fees

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1826.16

1826.16



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. Election Mall Technologies dba Fundraising by Net**

Mailing Address 1101 Pennsylvania Avenue NW

City	State	Zip Code
Washington	DC	20004-2504

Purpose of Disbursement  
Website Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2012

Amount of Each Disbursement this Period

25
----

Transaction ID : B-E-40095

**B. Donald Hamburger**

Mailing Address PO Box 5325

City	State	Zip Code
Santa Maria	CA	93456-5325

Purpose of Disbursement  
Administrative/Salary/Overhead: Fuel

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

170
-----

Transaction ID : B-E-40031

**c. Kyle Macdonald**

Mailing Address PO Box 221192

City	State	Zip Code
Carmel	CA	93922-1192

Purpose of Disbursement  
Postage and Lists

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2012

Amount of Each Disbursement this Period

853.21
--------

Transaction ID : B-E-40024

Original vendors exceeding reporting threshold itemized as memo transactions.

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1048.21

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. USPO**

Mailing Address 1221 State Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2012

City	State	Zip Code
Santa Barbara	CA	93190-7001

Amount of Each Disbursement this Period

382.5
-------

Purpose of Disbursement  
Postage

001

Transaction ID : B-S-4805

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) General 2012

**[MEMO ITEM]**

Subitemization of Kyle Macdonald(11/27/12)

State: District:

Full Name (Last, First, Middle Initial)

**B. Scott Howell & Company**Mailing Address 3900 Willow Street  
Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2012

City	State	Zip Code
Dallas	TX	75226-1248

Amount of Each Disbursement this Period

10555
-------

Purpose of Disbursement  
Advertising: Television Production

004

Transaction ID : B-E-39890

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) General 2012

State: District:

Full Name (Last, First, Middle Initial)

**c. Bob Haueter**

Mailing Address 27516 Artine Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

City	State	Zip Code
Santa Clarita	CA	91350-2182

Amount of Each Disbursement this Period

738.69
--------

Purpose of Disbursement  
Travel, Cell Phone and Office

001

Transaction ID : B-E-39995

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) General 2012

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11293.69

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. Scott Howell & Company**Mailing Address 3900 Willow Street  
Suite 200City State Zip Code  
Dallas TX 75226-1248Purpose of Disbursement  
Advertising: Television Production

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2012

Amount of Each Disbursement this Period

9772.5
--------

Transaction ID : B-E-40076

**B. Nygren & Company, Inc.**

Mailing Address 3470 Park Drive

City State Zip Code  
El Dorado Hills CA 95762-7318Purpose of Disbursement  
Strategic Consulting

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

1000
------

Transaction ID : B-E-39902

**C. Cassia A Beltran**

Mailing Address 412 S Concepcion Avenue

City State Zip Code  
Santa Maria CA 93454-5835Purpose of Disbursement  
Meals and Phone Cards

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

222.97
--------

Transaction ID : B-E-40028

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10995.47

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. The KAL Group**

Mailing Address PO Box 984

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

City	State	Zip Code
Willows	CA	95988-0984

Purpose of Disbursement  
Bookkeeping

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

Amount of Each Disbursement this Period

3148.57
---------

Transaction ID : B-E-40035

**B. Capital Strategies DC**

Mailing Address PO Box 1605

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2012

City	State	Zip Code
Alexandria	VA	22313-1605

Purpose of Disbursement  
Fundraising: Postage and Travel

003

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

Amount of Each Disbursement this Period

847.68
--------

Transaction ID : B-E-39904

Original vendors exceeding reporting threshold itemized as memo transactions.

**c. Hampton Inn**

Mailing Address 5665 Hollister Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2012

City	State	Zip Code
Santa Barbara	CA	93117-3423

Purpose of Disbursement  
Lodging

002

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

Amount of Each Disbursement this Period

475.48
--------

Transaction ID : B-S-4787

**[MEMO ITEM]**

Subitemization of Capital Strategies DC(12/03/12)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3996.25

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. Cecilia Castro**

Mailing Address 125 N Alisos Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

City	State	Zip Code
Santa Barbara	CA	93103-2709

Amount of Each Disbursement this Period

500
-----

Purpose of Disbursement  
Administrative/Salary/Overhead: Rent

001

Transaction ID : B-E-40046

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input checked="" type="checkbox"/> Other (specify) General 2012

State: District:

Full Name (Last, First, Middle Initial)

**B. Election Mall Technologies dba Fundraising by Net**

Mailing Address 1101 Pennsylvania Avenue NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		28		2012

City	State	Zip Code
Washington	DC	20004-2504

Amount of Each Disbursement this Period

400
-----

Purpose of Disbursement  
Processing Fees

001

Transaction ID : B-E-40094

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Kyle Macdonald**

Mailing Address PO Box 221192

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2012

City	State	Zip Code
Carmel	CA	93922-1192

Amount of Each Disbursement this Period

1000
------

Purpose of Disbursement  
Administrative/Salary/Overhead: Payroll

001

Transaction ID : B-E-39997

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input checked="" type="checkbox"/> Other (specify) General 2012

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1900.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. CompleteCampaigns.com a division of Aristotle International, Inc**

Mailing Address 205 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement  
Administrative/Salary/Overhead: Software

001

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) General 2012

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 28 / 2012

Amount of Each Disbursement this Period

425
-----

Transaction ID : B-E-40027

**B. Blair Biggs Campaigns**Mailing Address 20438 Osage Avenue  
Apt. B

City	State	Zip Code
Torrance	CA	90503-2612

Purpose of Disbursement  
Paraphernalia: Automated Calls

006

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) General 2012

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 03 / 2012

Amount of Each Disbursement this Period

4799.76
---------

Transaction ID : B-E-39994

**c. Bob Haueter**

Mailing Address 27516 Artine Drive

City	State	Zip Code
Santa Clarita	CA	91350-2182

Purpose of Disbursement  
Campaign Strategy Consultant

001

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) General 2012

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 28 / 2012

Amount of Each Disbursement this Period

4000
------

Transaction ID : B-E-40001

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9224.76



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. CompleteCampaigns.com a division of Aristotle International, Inc**

Mailing Address 205 Pennsylvania Avenue SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

City	State	Zip Code
Washington	DC	20003-1164

Amount of Each Disbursement this Period

438.14
--------

Purpose of Disbursement  
Broadcast Email Service

001

Transaction ID : B-E-40030

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

Full Name (Last, First, Middle Initial)

**B. Cassia A Beltran**

Mailing Address 412 S Concepcion Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

City	State	Zip Code
Santa Maria	CA	93454-5835

Amount of Each Disbursement this Period

524.82
--------

Purpose of Disbursement  
Meals and Cell Phone

001

Transaction ID : B-E-40029

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

Full Name (Last, First, Middle Initial)

**C. North Star Opinion Research**

Mailing Address 112 N Alfred Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2012

City	State	Zip Code
Alexandria	VA	22314-3011

Amount of Each Disbursement this Period

6000
------

Purpose of Disbursement  
Voter SurveyCategory/  
Type

Transaction ID : B-E-39993

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6962.96

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. Jensen Audio Visual**

Mailing Address 210 E Cota Street

City	State	Zip Code
Santa Barbara	CA	93101-1621

Purpose of Disbursement  
Microphone and Speakers

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

240
-----

Transaction ID : B-E-39908

**B. Raul Resendez Consulting**

Mailing Address 7046 Callaghan Road

City	State	Zip Code
San Antonio	TX	78229-4611

Purpose of Disbursement  
Strategic Consulting

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

5000
------

Transaction ID : B-E-40048

**C. Alec Parent**

Mailing Address 724 N Milpas Street

City	State	Zip Code
Santa Barbara	CA	93103-3029

Purpose of Disbursement  
Administrative/Salary/Overhead: Payroll

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

750
-----

Transaction ID : B-E-40000

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5990.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. Kurt Bardella**Mailing Address 1415 N Taft Street  
Apt. 885City State Zip Code  
Arlington VA 22201-2668Purpose of Disbursement  
Gas and Lodging

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

804.2
-------

Transaction ID : B-E-40033

**B. Benedetti & Associates CPA, Inc.**Mailing Address 2151 S College Drive  
Suite 101City State Zip Code  
Santa Maria CA 93455-1304Purpose of Disbursement  
Bookkeeping

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

259.35
--------

Transaction ID : B-E-40034

**c. Capital Strategies DC**

Mailing Address PO Box 1605

City State Zip Code  
Alexandria VA 22313-1605Purpose of Disbursement  
Fundraising Travel and Meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) General 2012

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2012

Amount of Each Disbursement this Period

3137.21
---------

Transaction ID : B-E-40079

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4200.76

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. Capital Strategies DC**

Mailing Address PO Box 1605

City	State	Zip Code
Alexandria	VA	22313-1605

Purpose of Disbursement  
Fundraising: Fundraising Commission

003

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012

Date of Disbursement

M M / D D / Y Y Y Y
12 / 03 / 2012

Amount of Each Disbursement this Period

7362.79
---------

Transaction ID : B-E-39903

**B. CompleteCampaigns.com a division of Aristotle International, Inc**

Mailing Address 205 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement  
Advertising: Software

004

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012

Date of Disbursement

M M / D D / Y Y Y Y
11 / 28 / 2012

Amount of Each Disbursement this Period

425
-----

Transaction ID : B-E-39596

**c. Southern California Edison**

Mailing Address PO Box 600

City	State	Zip Code
Rosemead	CA	91770-0600

Purpose of Disbursement  
Utilities

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012

Date of Disbursement

M M / D D / Y Y Y Y
11 / 28 / 2012

Amount of Each Disbursement this Period

26.09
-------

Transaction ID : B-E-40026

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7813.88

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. Donald Hamburger**

Mailing Address PO Box 5325

City	State	Zip Code
Santa Maria	CA	93456-5325

Purpose of Disbursement  
Administrative/Salary/Overhead: Payroll

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	General 2012

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

750
-----

Transaction ID : B-E-39999

**B. Wells Fargo Bank**

Mailing Address 3431 California Street

City	State	Zip Code
San Francisco	CA	94118-1836

Purpose of Disbursement  
Bank Fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2012

Amount of Each Disbursement this Period

123.97
--------

Transaction ID : B-E-40096

**c. Capitol Consulting & PR**

Mailing Address PO Box 22347

City	State	Zip Code
Carmel	CA	93922-0347

Purpose of Disbursement  
Fundraising Consulting

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	General 2012

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2012

Amount of Each Disbursement this Period

2500
------

Transaction ID : B-E-39998

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3373.97

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 31

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. Election Mall Technologies dba Fundraising by Net**

Mailing Address 1101 Pennsylvania Avenue NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2012

City	State	Zip Code
Washington	DC	20004-2504

Amount of Each Disbursement this Period

215.77
--------

Purpose of Disbursement  
Credit Card Processing Fees

001

Transaction ID : B-E-40093

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

215.77

71215.72

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 OF 31

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

Full Name (Last, First, Middle Initial)

**A. JACKSON MITCHELL, INC**

Mailing Address PO Box 834

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 01 / 2012

City State Zip Code  
Turlock CA 95381-0834

Amount of Each Disbursement this Period

1000

Purpose of Disbursement  
Contribution Refund: Contribution Refund

010

Transaction ID : B-E-40097

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) Primary 2012

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M / D D / Y Y Y Y

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M / D D / Y Y Y Y

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

1000.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Abel Maldonado For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Nygren & Company, Inc.**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Strategic Consulting

Mailing Address 3470 Park Drive

City State

Zip Code

El Dorado Hills

CA

95762-7318

Outstanding Balance Beginning This Period

1000

Transaction ID : SD10-DEBT39902

Amount Incurred This Period

0

Payment This Period

1000

Outstanding Balance at Close of This Period

0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Southern California Edison**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Utilities

Mailing Address PO Box 600

City State

Zip Code

Rosemead

CA

91770-0600

Outstanding Balance Beginning This Period

26.09

Transaction ID : SD10-DEBT40026

Amount Incurred This Period

0

Payment This Period

26.09

Outstanding Balance at Close of This Period

0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Bob Haueter**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Campaign Strategy Consultant

Mailing Address 27516 Artine Drive

City

State

Zip Code

Santa Clarita

CA

91350-2182

Outstanding Balance Beginning This Period

4738.69

Transaction ID : SD10-DEBT40001

Amount Incurred This Period

0

Payment This Period

4738.69

Outstanding Balance at Close of This Period

0

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 25 OF 31

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Abel Maldonado For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Kyle Macdonald**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Postage and Lists

Mailing Address PO Box 221192

City State

Zip Code

Carmel

CA

93922-1192

Outstanding Balance Beginning This Period

1853.21

Transaction ID : SD10-DEBT40024

Amount Incurred This Period

0

Payment This Period

1853.21

Outstanding Balance at Close of This Period

0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Jim Worthen**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Fundraising Consulting

Mailing Address PO Box 40435

City State

Zip Code

Santa Barbara

CA

93140-0435

Outstanding Balance Beginning This Period

2000

Transaction ID : SD10-DEBT40003

Amount Incurred This Period

0

Payment This Period

2000

Outstanding Balance at Close of This Period

0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Kurt Bardella**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Gas and Lodging

Mailing Address 1415 N Taft Street  
Apt. 885

City

State

Zip Code

Arlington

VA

22201-2668

Outstanding Balance Beginning This Period

2004.2

Transaction ID : SD10-DEBT40033

Amount Incurred This Period

0

Payment This Period

2004.2

Outstanding Balance at Close of This Period

0

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Abel Maldonado For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Alec Parent**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Payroll

Mailing Address 724 N Milpas Street

City State

Zip Code

Santa Barbara

CA

93103-3029

Outstanding Balance Beginning This Period

750

Transaction ID : SD10-DEBT40000

Amount Incurred This Period

0

Payment This Period

750

Outstanding Balance at Close of This Period

0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Cassia A Beltran**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Meals and  
Cell Phone

Mailing Address 412 S Concepcion Avenue

City State

Zip Code

Santa Maria

CA

93454-5835

Outstanding Balance Beginning This Period

1747.79

Transaction ID : SD10-DEBT40029

Amount Incurred This Period

0

Payment This Period

1747.79

Outstanding Balance at Close of This Period

0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Sunstar Media**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Software

Mailing Address 834 Abrego Street  
Suite B

City

State

Zip Code

Monterey

CA

93940-3104

Outstanding Balance Beginning This Period

117.5

Transaction ID : SD10-DEBT40081

Amount Incurred This Period

55

Payment This Period

117.5

Outstanding Balance at Close of This Period

55

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

55.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

PAGE 27 OF 31

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Abel Maldonado For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CompleteCampaigns.com a division of Aristotle International, Inc**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Broadcast  
Email Service

Mailing Address 205 Pennsylvania Avenue SE

City State

Zip Code

Washington

DC

20003-1164

Outstanding Balance Beginning This Period

438.14

Transaction ID : SD10-DEBT40030

Amount Incurred This Period

0

Payment This Period

438.14

Outstanding Balance at Close of This Period

0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Capitol Consulting & PR**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Fundraising  
Consulting

Mailing Address PO Box 22347

City State

Zip Code

Carmel

CA

93922-0347

Outstanding Balance Beginning This Period

2500

Transaction ID : SD10-DEBT39998

Amount Incurred This Period

0

Payment This Period

2500

Outstanding Balance at Close of This Period

0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Benedetti & Associates CPA, Inc.**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Bookkeeping

Mailing Address 2151 S College Drive  
Suite 101

City

State

Zip Code

Santa Maria

CA

93455-1304

Outstanding Balance Beginning This Period

259.35

Transaction ID : SD10-DEBT40034

Amount Incurred This Period

0

Payment This Period

259.35

Outstanding Balance at Close of This Period

0

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

PAGE 28 OF 31

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Abel Maldonado For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Raul Resendez Consulting**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Office Utilities  
and Travel

Mailing Address 7046 Callaghan Road

City State

Zip Code

San Antonio

TX

78229-4611

Outstanding Balance Beginning This Period

5000

Transaction ID : SD10-DEBT40082

Amount Incurred This Period

734.84

Payment This Period

5000

Outstanding Balance at Close of This Period

734.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Donald Hamburger**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Fuel

Mailing Address PO Box 5325

City State

Zip Code

Santa Maria

CA

93456-5325

Outstanding Balance Beginning This Period

920

Transaction ID : SD10-DEBT40031

Amount Incurred This Period

0

Payment This Period

920

Outstanding Balance at Close of This Period

0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**The KAL Group**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Bookkeeping

Mailing Address PO Box 984

City

State

Zip Code

Willows

CA

95988-0984

Outstanding Balance Beginning This Period

3148.57

Transaction ID : SD10-DEBT40035

Amount Incurred This Period

0

Payment This Period

3148.57

Outstanding Balance at Close of This Period

0

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

734.84

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

PAGE 29 OF 31

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Abel Maldonado For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Jensen Audio Visual**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Microphone  
and Speakers

Mailing Address 210 E Cota Street

City State

Zip Code

Santa Barbara

CA

93101-1621

Outstanding Balance Beginning This Period

240

Transaction ID : SD10-DEBT39908

Amount Incurred This Period

0

Payment This Period

240

Outstanding Balance at Close of This Period

0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CompleteCampaigns.com a division of Aristotle International, Inc**

Nature of Debt (Purpose):

Advertising: Software

Mailing Address 205 Pennsylvania Avenue SE

City State

Zip Code

Washington

DC

20003-1164

Outstanding Balance Beginning This Period

425

Transaction ID : SD10-DEBT39596

Amount Incurred This Period

0

Payment This Period

425

Outstanding Balance at Close of This Period

0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Scott Howell & Company**

Nature of Debt (Purpose):

Advertising: Television Production

Mailing Address 3900 Willow Street  
Suite 200

City

State

Zip Code

Dallas

TX

75226-1248

Outstanding Balance Beginning This Period

40327.5

Transaction ID : SD10-DEBT40076

Amount Incurred This Period

0

Payment This Period

20327.5

Outstanding Balance at Close of This Period

20000

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

20000.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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PAGE 30 OF 31

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Abel Maldonado For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Harris Ranch**

Nature of Debt (Purpose):

Fundraising: Fundraising Catering

Mailing Address 24505 W Dorris Avenue

City State

Zip Code

Coalinga

CA

93210-9667

Outstanding Balance Beginning This Period

0

Transaction ID : SD10-DEBT40086

Amount Incurred This Period

1015.26

Payment This Period

0

Outstanding Balance at Close of This Period

1015.26

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Capital Strategies DC**

Nature of Debt (Purpose):

Fundraising: Fundraising Travel and Meals

Mailing Address PO Box 1605

City State

Zip Code

Alexandria

VA

22313-1605

Outstanding Balance Beginning This Period

11347.68

Transaction ID : SD10-DEBT40079

Amount Incurred This Period

0

Payment This Period

11347.68

Outstanding Balance at Close of This Period

0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Kitchen for Exploring Foods, LLC**

Nature of Debt (Purpose):

Fundraising: Fundraiser Catering

Mailing Address 1434 W Colorado Boulevard

City

State

Zip Code

Pasadena

CA

91105-1414

Outstanding Balance Beginning This Period

4357.74

Transaction ID : SD10-DEBT39909

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

4357.74

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

5373.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 31 OF 31

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Abel Maldonado For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mark's Garden**

Nature of Debt (Purpose):

Fundraising: Fundraiser Decor

Mailing Address 13838 Ventura Boulevard

City State

Zip Code

Sherman Oaks

CA

91423-3629

Outstanding Balance Beginning This Period

598.13

Transaction ID : SD10-DEBT39910

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

598.13

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Blair Biggs Campaigns**

Nature of Debt (Purpose):

Paraphernalia: Automated Calls

Mailing Address 20438 Osage Avenue  
Apt. B

City State

Zip Code

Torrance

CA

90503-2612

Outstanding Balance Beginning This Period

4799.76

Transaction ID : SD10-DEBT39994

Amount Incurred This Period

0

Payment This Period

4799.76

Outstanding Balance at Close of This Period

0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**North Star Opinion Research**

Nature of Debt (Purpose):

Polling/Surveys: Voter Survey

Mailing Address 112 N Alfred Street

City

State

Zip Code

Alexandria

VA

22314-3011

Outstanding Balance Beginning This Period

6000

Transaction ID : SD10-DEBT39993

Amount Incurred This Period

0

Payment This Period

6000

Outstanding Balance at Close of This Period

0

1) **SUBTOTALS** This Period This Page (optional) ..... ►

598.13

2) **TOTALS** This Period (last page this line number only) ..... ►

26760.97

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

26760.97